

Agency Name: First Steps Region

Form for the Registration of Legally-Blind Children for Federal Quota Funds
Registered in Your Agency as of Monday, January 4, 2016
For Purposes of the *Act to Promote the Education of the Blind*

☐ Check here if you have no children to report. Complete the back of the form including your signature and date, and return it to Yvonne Ali (mailing address on back of form at bottom).

Note: All children registered for these purposes must have a central visual acuity of 20/200 or less in the better eye with best correction; a peripheral field of vision no greater than 20 degrees; or visual performance reduced by a brain injury or dysfunction when visual function meets the definition of blindness as determined by an eye care specialist or medical doctor.

Review & update each data record and/or add a child by completing all data fields.

Name of Child	County of Residence	Date of Birth	Right Eye	Left Eye	Primary Language used for Instruction	Vision Services by TVI?	School District to Which Child Will Transition at age 3

Signature: _____

Please Print Name: _____

Mailing Address: _____

Telephone #: _____

Title: _____

Date: _____

E-mail Address: _____

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Name of Child	County of Residence	Date of Birth	Right Eye	Left Eye	Primary Language used for Instruction	Vision Services by TVI?	School District to Which Child Will Transition at age 3

Return the completed form by February 1st:

Yvonne Ali, Missouri Instructional Resource Center for the Visually Impaired

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